

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kristi D. McNeilly
8362 Tamarack Village
Suite 119-276
Woodbury, MN 55125



9590 9402 4439 8248 1158 18

2. Article Number (Number from carrier label)

7018 1830 0002 1141 9989

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

TOW FITZ

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below:
 No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

USPS TRACKING



9590 9402 4439 8248 1158 18

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal ServiceRECEIVER
BY MAIL

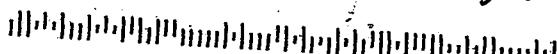
SEP 23 2022

CLERK, U.S. DISTRICT COURT
ST. PAUL, MN

• Sender: Please print your name, address, and ZIP+4® in this box*

U.S. District Court
Clerk's Office
316 N. Robert Street-Suite 100
St. Paul, MN 55101

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SCANNED

SEP 26 2022

U.S. DISTRICT COURT ST. PAUL

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